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| DECLARATION | · · · · · · · | YOR | \ <u></u> | y Docket | IN-5519 | | | | |
| | ESIGN | | First N | am dinventor | Christopher J. BRAD | JFORD et al. | | | |
| | APPLICATION | | l | СОМ | PLETE IF KNOWN | | | | |
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| Declaration or | x Declara | | Annlin | -Al - Neurals - | 00/044 005 | | | | |
| / - | Submitted O Submitted after initial Application Number 09/941,295 | | | | | | | | |
| with initial | <i>-</i> | surcharge | Filing C | | August 28, 2001 | | | | |
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| 10 | <u>Cyrequired</u> | <u>u</u> | Examir | ner Name | | | | | |
| As below named inverter, here | the declare that: | | | | | | | | |
| My residence, post office addre | | are as stated below | w next to m | y name. | | | | | |
| I believe I am the original, first a | ind sole inventor (i | if only name is liste | ed below) or | r an original, first ar | nd joint inventor (if plural | names are | | | |
| listed below) of the subject matt | er which is claime | d and for which a | patent is so | ught on the invention | on entitled: | | | | |
| DUAL CURE COATI | 4G COMPOSI | | | | THE SAME | | | | |
| The specification of which: | | (Title of the | e Invention) |) | | | | | |
| is attached hereto | | | | | | | | | |
| is attached hereto | | | | | | | | | |
| x Was filed on Augu | ıst 28, 2001 🧼 | as United States A | pplication o | r PCT Internationa | Application Number 09/ | 941,295 | | | |
| and was | amended on | (if ap | plicable). | | | | | | |
| I acknowledge the duty to disclopart applications, material informinternational filing date of the co | nation which becar | me available betwe | | | | | | | |
| I hereby claim foreign priority certificate or 365 (a) of any PC listed below and have also ident international application(s) havin | T international ap ified below, by che g a filing date befo | oplication(s) design ecking the box, any ore that of the appl | nating at lea y foreign ap lication on w | ast one country oth oplication(s) for pate which priority is claim | ner than the United State ent or inventor's certificat med. | es of America te, or any PCT | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing DATE/MONTH/ | | Priority Not Claimed | Certified Copy A Yes | No No | | | |
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| I hereby claim the | benefit under 35 l | U.S.C 119(e) of an | v United St | ates provisional an | plication(s) listed below: | | | | |
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| | by appoint the practition and to transact all | | | | vided below to prosecute this nnected therewith. |
| x Cu | st mer Number r Bar C de | 2 | 6922 | or | C rrespondence address bel w |
| County | United States of Am | erica Telephone | (248) 948- | 2020 Fa | x (248) 948-2093 |
| County | I clined clates of Alli | crica i relepitorie | 1 (270) 570 | LULU I a. | ^ (2 70/070-2000 |

| Name OF SOLE OR FIRST NVENTOR: A petition has been filed for this unsigned in | | | | | | | | |
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| Given Name | Christopher J. | | Family Na | me BRA | DFORD | | | |
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| Inventor's | | | Date | | | | | |
| | 1/1/1 | | August 28 2001 | | | | | |
| Signature / // | MM | | August 24, 2001 | | | | | |
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Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1.1]

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| | POWER OF ATTORNEY Ssociated with the Customer Number provided below to prosecute this |
| | ess in the Patent and Trademark Office connected therewith. |
| X Customer Number or Bar Code Label | or Correspondence address below 26922 PATENT-TRADEMARK OFFICE |
| | |

| Name of Additional Joint Inventor, If any: A petition has been filed for this unsigned inventor | | | | | | | | |
|--|-----------|-------|----------|---------|--------------------------|-------------|----------|--|
| Given Name Marcy Family Name ZIMMER (first and middle [if any] or Surname | | | | | | | | |
| Inventor's Signature | \supset | Date | 11/7/01 | | | | | |
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| City Warren | | State | Michigan | | Zip | 48 | 091 | |

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| x I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. | | | | | | | | |
| x Cus | st mer Number r Bar Cod | Lab ! | | 922 EMARK OFFICE | r [| C r | r sp ndence address below | |
| County | United States of Amo | erica | Telephone | (248) 948-20 | 20 | Fax | (248) 948-2093 | |

| Name | Name OF SECOND INVENTOR: A petition has been filed for this unsigned inventor | | | | | | | | | |
|---|--|-----------|--------|----------|---------|--------------------------|-------------|----------|--|--|
| Given Name Ryan F. Family Name O'DONNELL or Surname | | | | | | | | | | |
| Inventor Signatur | r's | m FO'L | 2 | | Date | | | | | |
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| Mailing / | Address | 6280 Wago | n Road | | | | | | | |
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| 26922 PATENT-TRADEMARK OFFICE | | | | | | | |
| County | United States of America | Telephone | (248) 948-2020 | Fax | (248) 948-2093 | | |

Thereby declare that all statements made herein of my own knowledge are true and that all statements made

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| Name OF SECOND INVENTOR: A petition has been filed for this unsigned inventor | | | | | | | | | |
|--|---------------|-------|--|----------------------|--------------------------|-------------|----------|--|--|
| Given Name Lyle Family Name CAILLOUETTE (first and middle [if any] or Surname | | | | | | | | | |
| Inventor's Signature | le Caill | ovel | A CONTRACTOR OF THE PARTY OF TH | Date August 28, 2001 | | | | | |
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| Mailing Address 28428 West 8 Mile, Apartment C7 | | | | | | | | | |
| City Farmington Hill | ls St | ate | Michigan | | Zip | 48 | 336 | | |

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Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1.1]

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| Name of Additional Joint Inventor, If any: A petition has been filed for this unsigned inventor | | | | | | | | | |
|--|-------------|--------|---------|--------------------------------|--------|-----|--------------|----------|--|
| Given Name (first and middlg [if any] | Jennifer A. | | | Family Name RISCHKE or Surname | | | | | |
| Inventor's Signature | U | Date 5 | pt 2: | 5,20 | 00/ | | | | |
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Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1.1]